									Application or Docket Number			
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10734232			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS	20				ı	RATE		٦	RATE	FEE	
F	DR			· NUME	BER EXTRA		BASIC FI	EE 385.00	OR.	BASIC FEE		
70	OTAL CHARGE	①_@inus 20= *		• _	•		XS 9=		1	XS18=	*	
-	DEPENDENT C	minus 3 = *		•	/				OR			
_	JLTIPLE DEPE	L			X43				OR	X86=		
								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							Sa.	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II											OTHER	
10(27, U4 (Column 1) (Column 2) (Column 3)								SMALI	ENTITY	OR 1	SMALL	
NT A		REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	.22	Minus	·· A	O	= 2		XS 9=		OR	X\$18=	36
ME	independent	. /	Minus	*** 3	う	=		X43=		OR	X86=	<u> </u>
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┟		†		000	
							L	+145=		OR	+290=	00
							A	DDIT. FEI		OR	ADDIT. FEE	36
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	7	NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Міпиѕ	***		=		X43=		OR	X86=	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-		1			
							L	+145=	.	OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRÉSENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ZQ	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
Z E	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			
	(the optacle selec	ma 1 is loss than th	o ontre io cole	mn 2 weite	"O" in cal	uma 3	L	+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa shor Previously Pair					r faun	d in the a	opropriate bo	cin col	umn 1.	